Arizona CHOICES
Access to Recovery

Voucher Management System (VMS)

Training Manual
For Service Providers

The Voucher Management System Introduction

Welcome to the Voucher Management System (VMS)!

This web-based tool is used to manage Access to Recovery Drug Court Client treatment and recovery support services vouchers.

The Manual is divided into five sections that will go over the steps you need to know to successfully view the client referrals that have been assigned to you, how to accept the clients and vouchers, and how to send the information necessary to complete the billing process.

If you ever have questions on how to maneuver through the VMS system, please feel free to contact Pima Prevention Partnership at:

azatrhelp@thepartnership.us

1-866-476-5777

Help is available Monday through Friday, 8:00 am to 5:00 pm. We will make every attempt to respond within one business day.

Section One: Getting Started

In this section you will:

- Find out where to go on the internet to access the VMS system and learn about your password.
- Become familiar with the components on the VMS home page

Section Two: Client Services

In this section you will learn how to: search for, and review:

- Search for, and review, client referrals to your agency.
- Search for, and review, vouchers sent to your agency by the Drug Courts Case Managers
- Accept the client referral.
- Accept vouchers so services can be provided to the client.
- Create Encounters to record the services rendered.
- Release the Encounters to billing.

Section Three: Billing and Payment

In this section you will learn how to:

- View billing claims and provider payments

Section Four: End of Services

In this section you will learn how to:

- Close a client record

Before You Start...

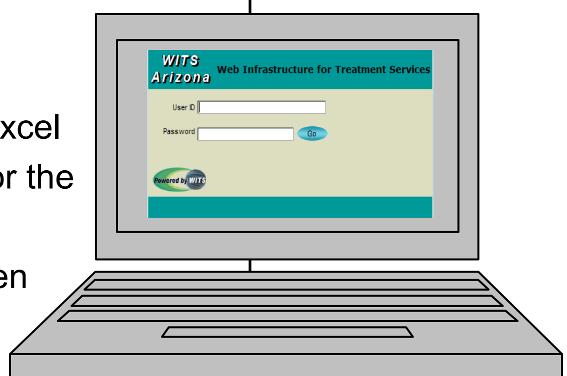
✓ Use Internet Explorer as your web browser. The VMS does not work well with other web browsers such as Mozilla Firefox.

✓ Please note that the website address does not include “www” at the beginning.

✓ “Maximize” your screen by clicking on the icon in the top right corner.

✓ Always remember to log out of the VMS system. For security reasons, the system is designed to lock out users with open, inactive connections.

✓ Many of the screens allow you to download the information into an Excel spreadsheet. To download, look for the (*Export*) link and hold the **CTRL** button down until the prompt to open the file appears.



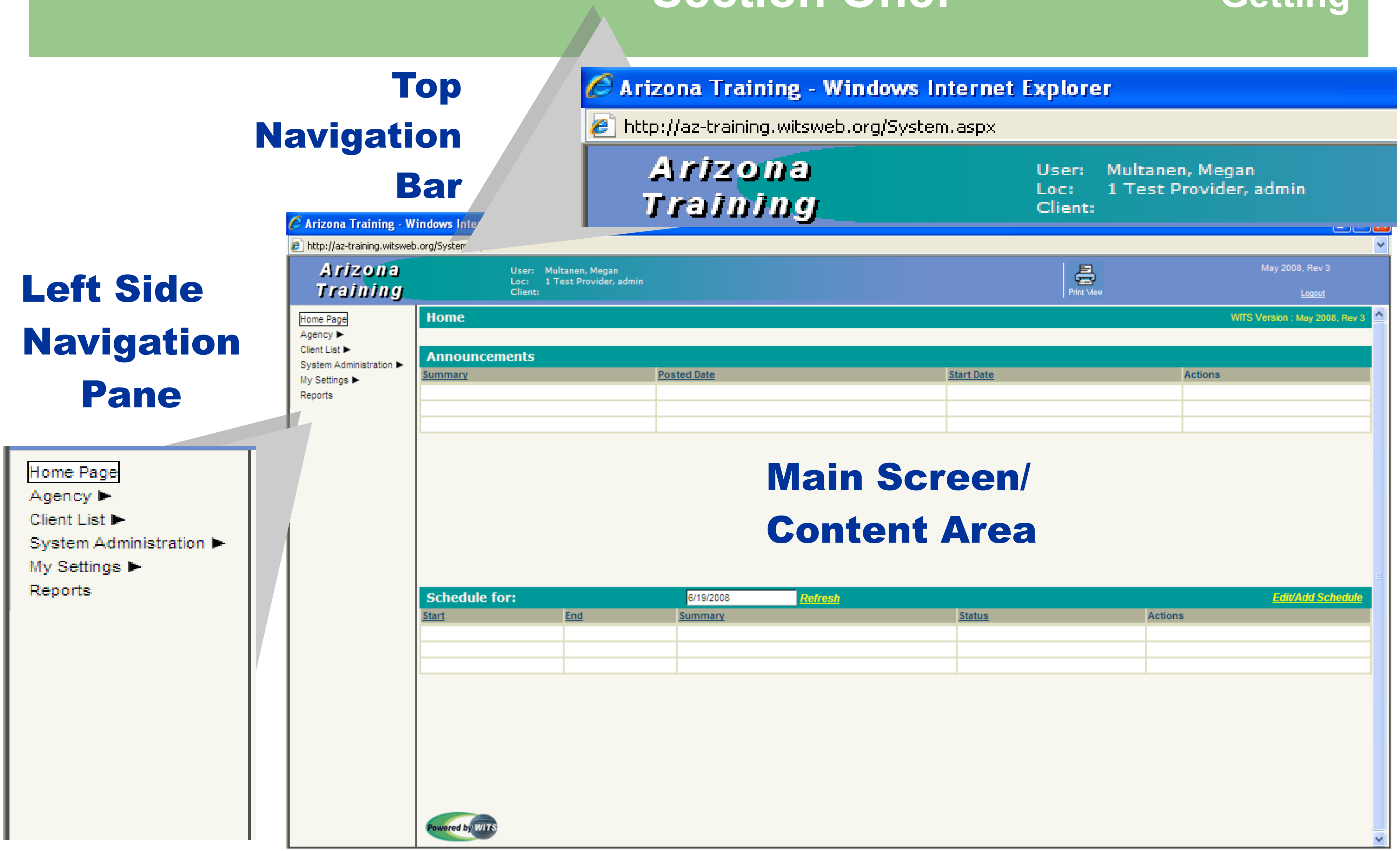
The VMS website address is:

https://az.witsweb.org

Each time you log into the VMS, you will enter a User ID, Password, and PIN.

- You will receive an email with your User ID, Password, and PIN number to use the first time you log into the system.
- Once you log in, you can choose your own Password and PIN. These must be at least six (6) characters long and contain at least one number and one letter.

Section One: Getting



The first screen that opens in the VMS system is the *Home Page*. This is where you'll be able to see any referrals and announcements for your facility.

If there are any announcements for your agency, you will see them in the "Announcement" section of the *Home Page*.

- ✓ Any announcements that have been posted for your agency will appear in the "Announcement" section of the *Home Page*.

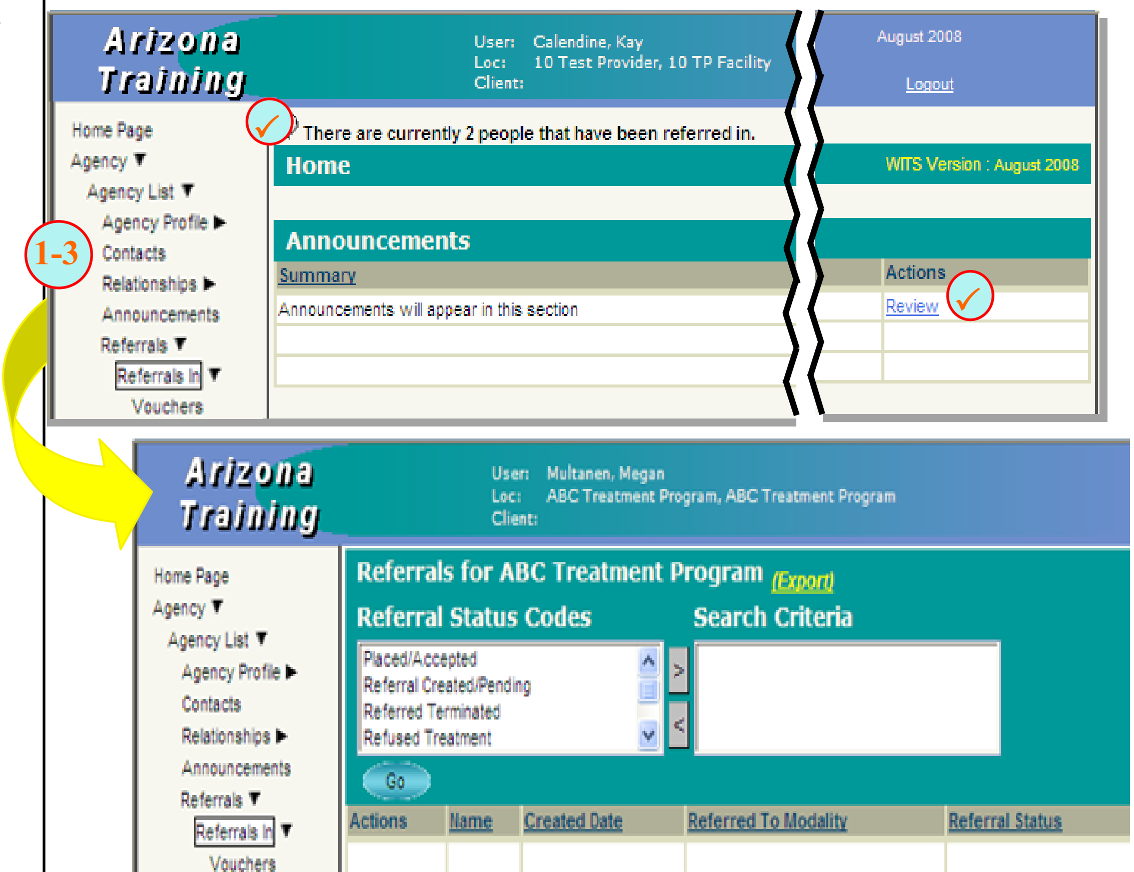
  To view the details on an announcement click on **Review** active link in the "Actions" column.

- ✓ Referrals will appear at the top of the screen directly below the Top Navigation Bar.

To review the client referrals for your agency:

1. Move your mouse to the *Left Side Navigation Pane*
2. Click on the **Agency** link
3. Click on the **Referrals** link
4. Click on the **Referrals In** link

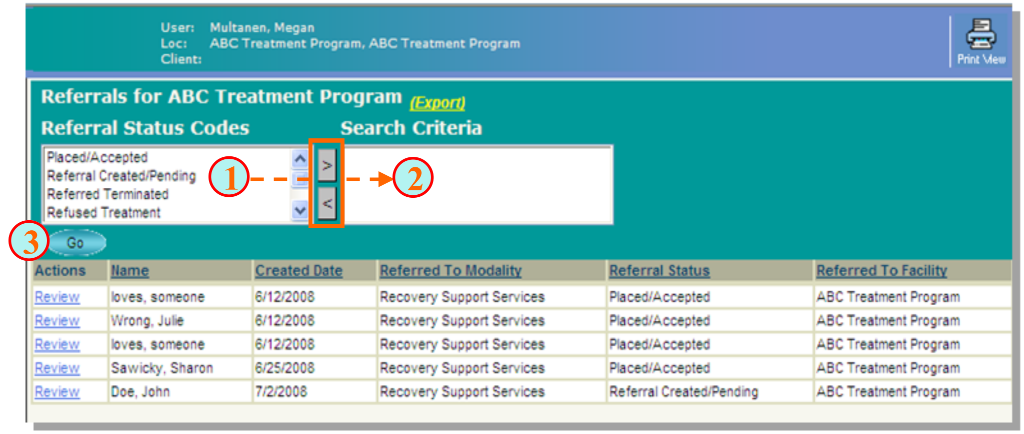
This opens the *Referrals Search* screen.



From the *Referrals Search* screen, you are able to search for the clients who have been referred to your agency. begin

To search for client referrals:

1. Select your search criteria from the “Referral Status Codes” box by clicking on the code so it is highlighted.
   - ✓ New referrals will be categorized under “Referral Created/Pending.”
   - ✓ You may select more than one status code by holding the Shift key while click-ing on the code.
   - ✓ If the Search Criteria box is left blank, the system will list all of the clients referred to your agency, regardless of their status.
2. Move the status code to the “Search Criteria” box by clicking the > button.
3. When you have selected all of your search criteria, click on the Go button This will bring up a list of client referrals for your agency that match the search criteria.



Referral Status Codes Definitions

- Placed/Accepted: The provider has accepted the referral and agrees to provide the services.
- Referral Created/Pending: The provider has not yet accepted the referral. These are new referrals for the provider to review and accept or decline.
- Referred Terminated: The provider has terminated the referral.
- Refused Treatment: The services were refused by either the client or the provider.
- Waitlisted: The provider plans to accept the client; however, the client must be put on a waitlist to receive services.

When the client list is generated, any referred clients for your agency appear at the bottom of the *Referrals Search"* screen. This screen contains several categories:

Actions: What options you have, (i.e. review client referral information). This box will contain an active link.

Name: The name of the client as entered by the referring party (i.e. the Drug Court).

Referral Date: Date Drug Court Case Manager referred client to services.

Referred to Modality: The service category to which the Drug Court Coordinator is referring the client. This will be either Recovery Support Services or Treatment Services.

Referral Status: Automatically displays the appropriate referral status code.

Referred to Facility: The facility to which client is referred for services.

Non-System Agency: Indicates whether the partner is part of the ATR system.

Referral Comments: Contains any comments the Drug Court Coordinator has made in the referral process.

Referrals for 2 TP Facility *(Export)*

Referral Status Codes

Placed/Accepted
Referral Created/Pending
Referred Terminated
Refused Treatment

Search Criteria

Go

Actions	Client ID	Client Name	DOB	Created Date	Referring Agency/Facility	Referred To Modality	Referral Status	Ref to Facility	Referral Comments
Review	M439352MS468100	Smith, David	4/3/1983	7/10/2008	Maricopa County Drug Court/Maricopa County DC	Recovery Support Services	Placed/Accepted	2 TP Facility	
Review	M669835OG037100	Gonzalez, Reggie	6/6/1978	7/10/2008	Maricopa County Drug Court/Maricopa County DC	Recovery Support Services	Placed/Accepted	2 TP Facility	
Review	F249695FA807121	Afton, Amy	12/24/1976	7/10/2008	Maricopa County Drug Court/Maricopa County DC	Recovery Support Services	Placed/Accepted	2 TP Facility	
Review	F249695FA807121	Afton, Amy	12/24/1976	7/24/2008	2 Test Provider/2 TP Facility	Recovery Support Services	Placed/Accepted	2 TP Facility	
Review	M219859EP946101	Peters, Paul	12/1/1968	7/24/2008	Maricopa County Drug Court/Maricopa County DC	Recovery Support Services	Placed/Accepted	2 TP Facility	
Review	M129550AH066110	Harding, Fred	1/12/1965	9/3/2008	Maricopa County Drug Court/Maricopa County DC	Recovery Support Services	Referred Terminated	2 TP Facility	
Review	F229202AV026100	Vargas, Dora	2/2/1962	9/3/2008	Maricopa County Drug Court/Maricopa County DC	Recovery Support Services	Placed/Accepted	2 TP Facility	
Review	F509280EP298120	Penman, Amy	5/20/1982	9/3/2008	Maricopa County Drug Court/Maricopa County DC	Recovery Support Services	Placed/Accepted	2 TP Facility	

Section Two: Client Services

✓ Accepting Client Referrals

Detailed client referral information can be seen for each of the clients listed by reviewing the client referral.

To review the client referral:

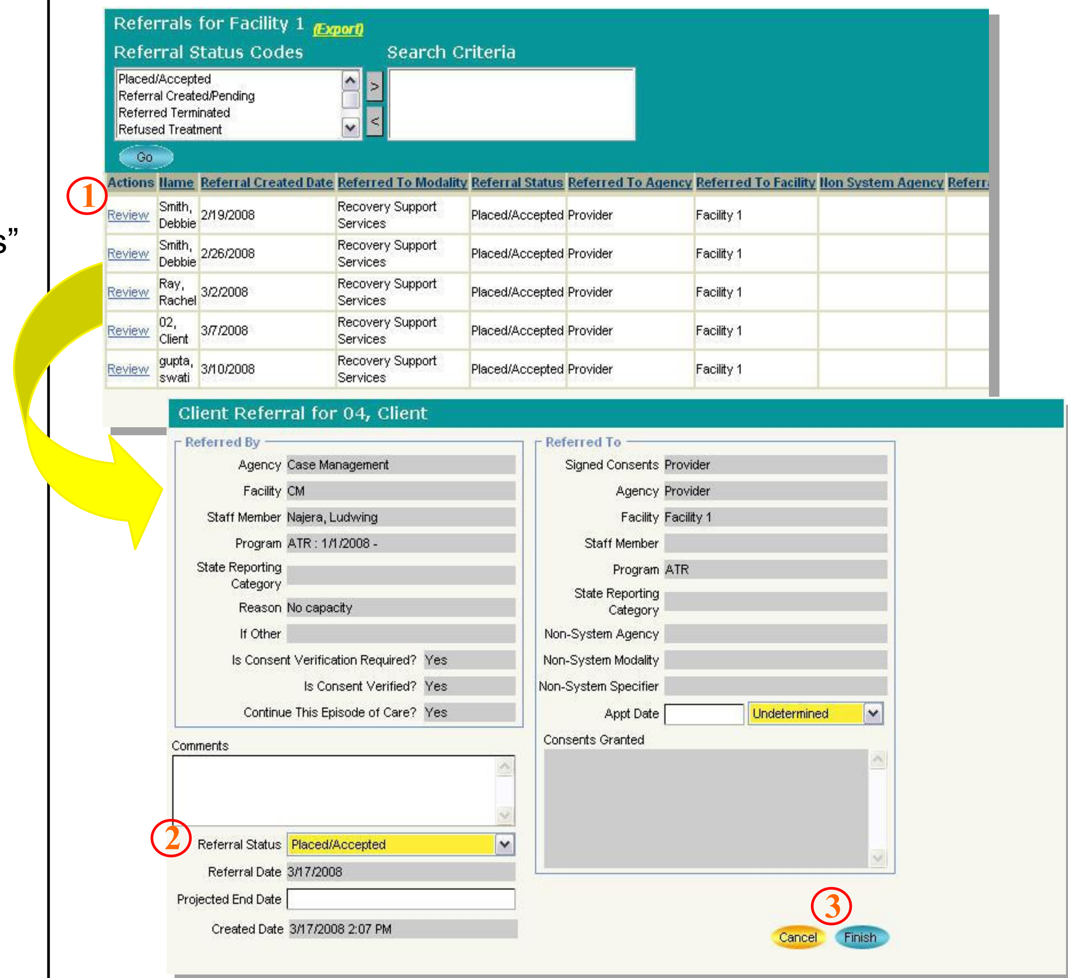
1. Click on the Review active link in the "Actions" box. The *Client Referral* screen will appear.

To see voucher information and details regarding the client's service needs, the referral will need to be ***Accepted.***

To ***Accept*** the client referral:

2. Select Placed/Accepted from the drop down list in the "Referral Status" box.
3. Click Finish to complete this step.

Please Note: In this step you are accepting the clients' records so that you can see detailed client information and any comments entered by the Drug Court Case Manager. This is not a consent to provide services.



Section Two: Client Services

✓ Accepting a Client Voucher

You can view client vouchers through the **Agency** link on the *Left Side Navigation Pane*. However, to accept the voucher, you will need to go through the Client link.

When you accept a referral, the VMS will automatically open the **Client** link, bypassing the need to perform a client search.

To Accept or Decline a client voucher:

1. From the *Left Side Navigation Pane,* click on the **Client List, Client Profile,** and **Voucher** links.

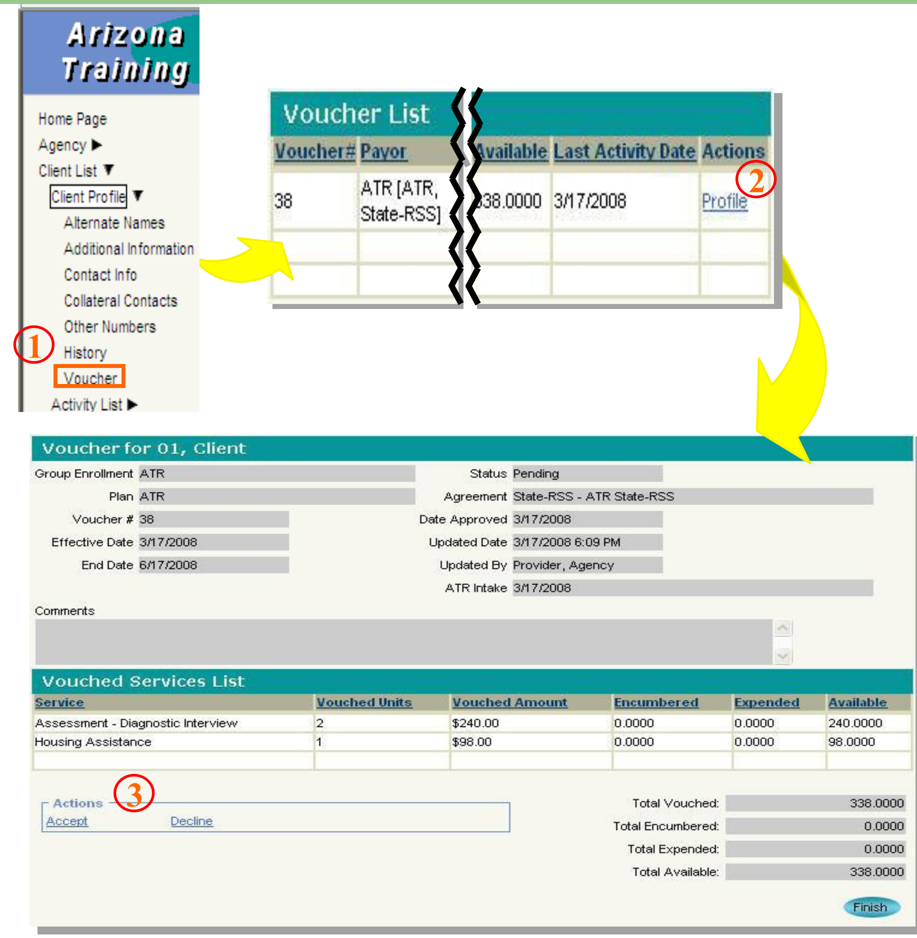
The *Voucher List* screen displays a list of the client's available vouchers.

✓ You must first accept the voucher before you can see a client for the vouched services.

2. Click on the **Profile** link in the Action column.

A *Voucher* screen with a "Vouched Services List" will appear.

3. To accept or decline the voucher click on the **Accept** or **Decline** link in the Actions box at the bottom of the page.



<u>Please Note</u>: If you *Accept* this voucher you have accepted this client and agree to provide the vouched service. If you decline, you are indicating that you will not provide the vouched services.

Section Two:

Client Services

✓ **Performing a Client Search**

With the exception of accepting referrals, all of the actions in the VMS will be through the system's client record, including: accepting a client voucher, recording services rendered, and submitting records for billing.

The first step opening the system's client record involves performing a client search.

To perform a client search:

1. Move your mouse to the *Left Side Navigation Pane* and click on the **Client List** Link

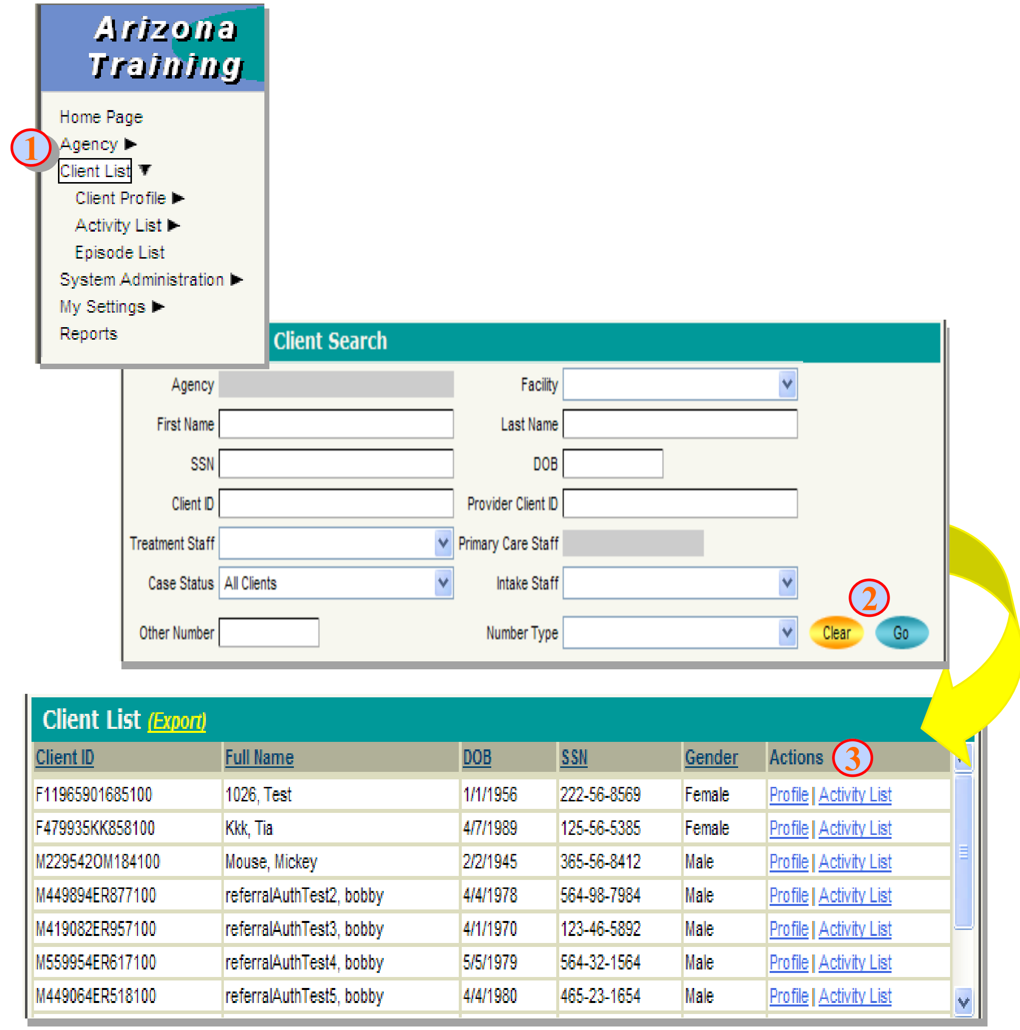
A blank *Client Search* screen will appear.

- ✓ To search for clients referred to your agency, fill in any of the search fields (First, Last, SSN, DOB).
- ✓ To see a comprehensive list of all clients referred to your agency, leave all of the search fields blank.

2. Click the Go button.

Once the *Client List* is populated, look for the particular client whose referral you would like to review.

3. Click on the **Profile** active link for the appropriate client. This link is located in the row where the client's name is listed.

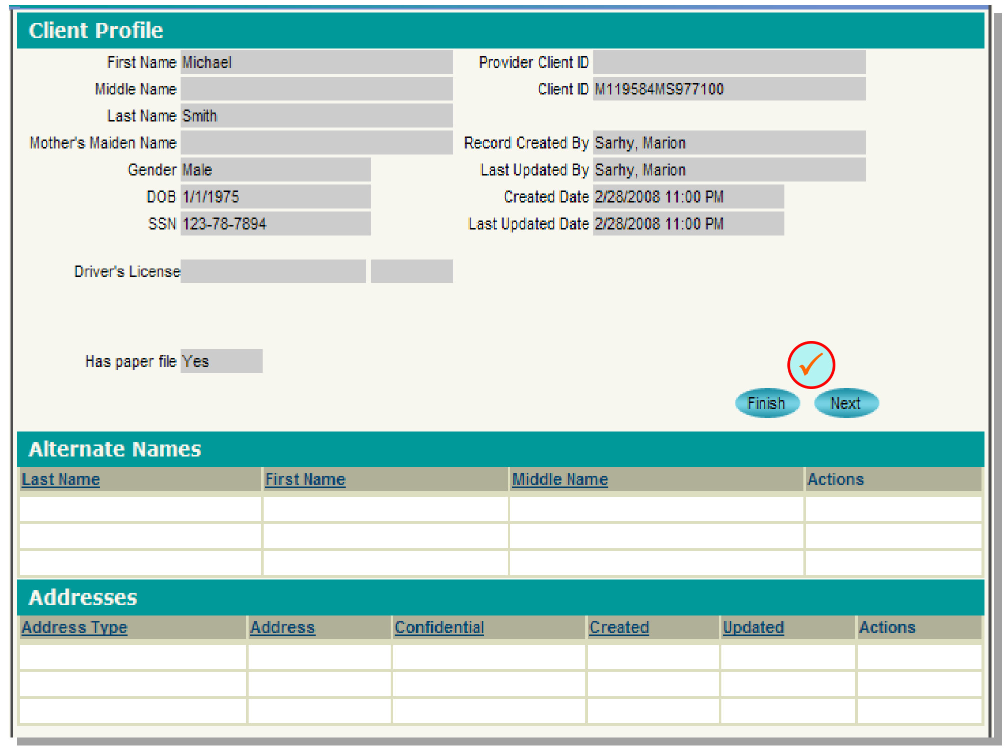


By clicking on the **Profile** active link in the client record on the *Client List* screen, you will open the *Client Profile* screen.

✓ From this screen you can use the Next navigation button to see additional information including

- Alternate Name
- Phone numbers
- Addresses
- Collateral Information
- Additional information including special needs, ethnicity and notes
- History of the record (who has entered information on the client)

✓ At any time, you may click on the Finish button to complete your review.



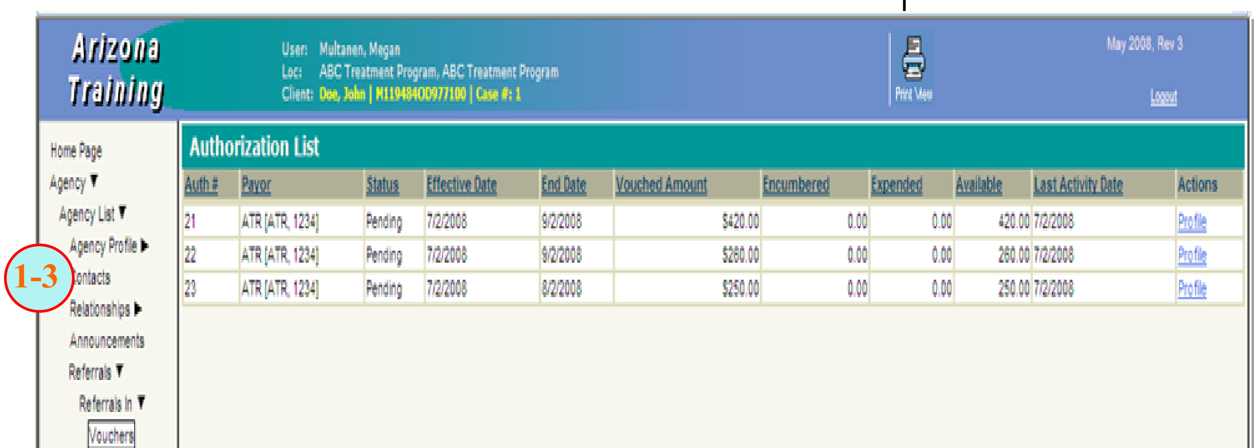
Once you have accepted a referral, you can go in at any time and view a summary, as well as a more detailed description of the voucher. The *Authorization List* gives an overview of the vouchers that are connected to this client's referral.

- ✓ When the Authorization List is opened through the Agency link, you will be able to view all of the information, but you will not be able to take any actions, including accepting the voucher, from this screen.

To review voucher(s) for a client whose referral has been accepted:

1. On the *Left Side Navigation Pane,* under the **Agency** link, click on the **Referrals** link and then on the **Referrals In** link
2. Select the client referral connected to the voucher you want to review. The client name will appear in yellow on the *Top Navigation Bar*
3. Click on the **Vouchers** link.

The Vouchers link will open the *Authorization List* screen, which provides voucher information summary on each of the vouchers issued to your agency for this client.

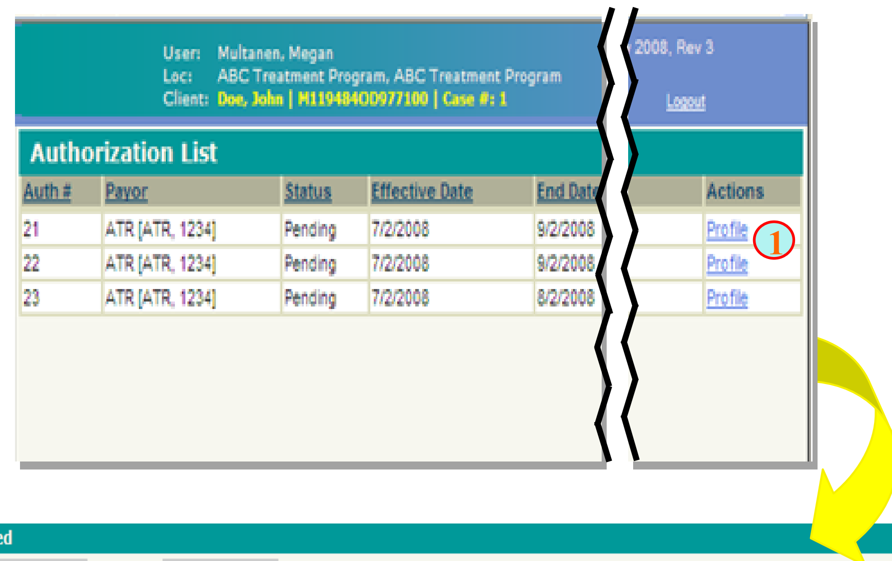


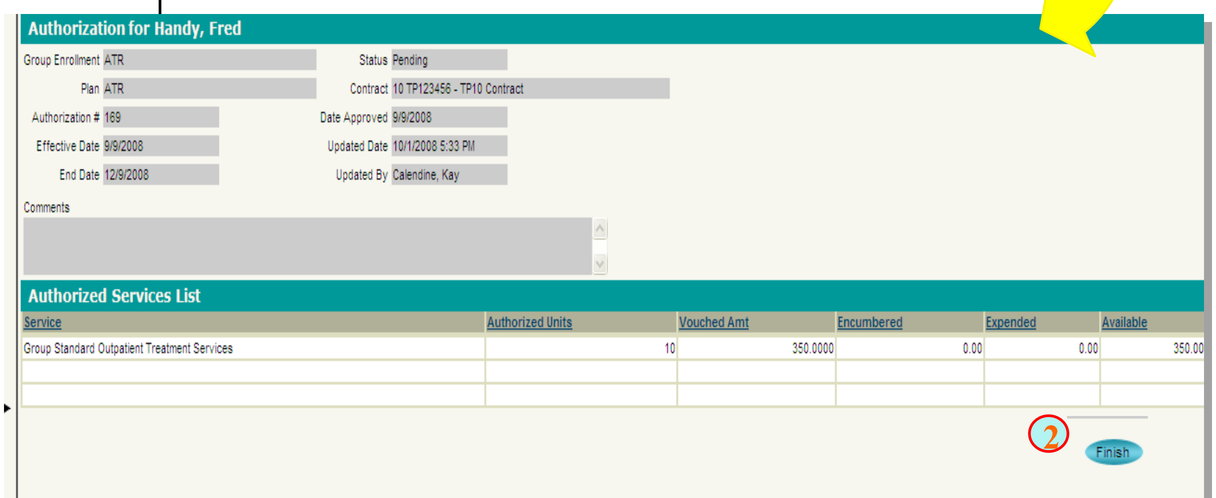
<u>Please Note</u>: viewing a client's voucher for services is not a consent to provide services.

The *Authorization Service* screen gives you a more detailed view of the client's voucher, including the requested service, the monetary value of the voucher, and the active and expiration dates.

1. From the *Authorization List* screen, click on the **Profile** link in the Actions column.
   - ✓ Each voucher you receive from the Drug Courts will contain only one service.
2. Once you have reviewed the voucher details click the Finish button. This will return you to the *Authorization* screen.

> ✓ **Remember: Viewing the voucher does not commit you to providing services. You will be able to accept or reject the voucher in the next step.**





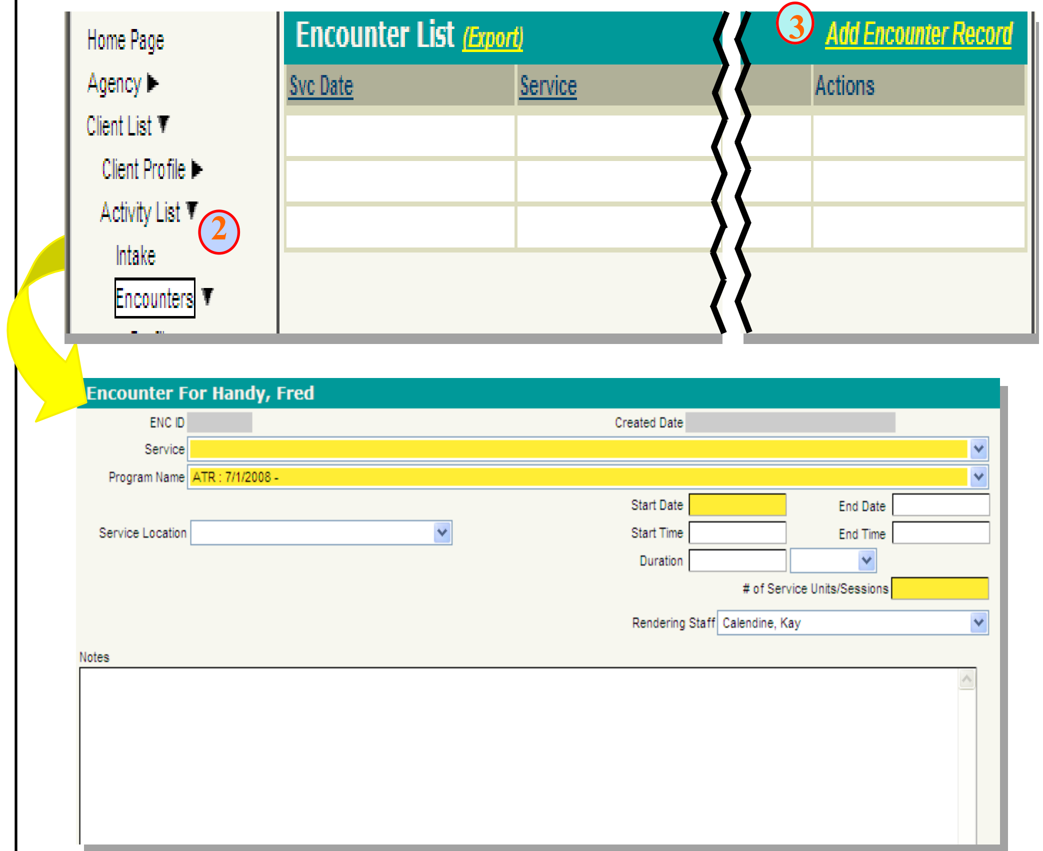
After accepting a client's voucher you can begin providing services that are billable to the Access to Recovery Program.

Services are recorded in the VMS as a Client Encounter. Creating an Encounter record as services are provided is required because this is where the system shows:

- ✓ Proof service was rendered
- ✓ Case notes that may be important to your agency
- ✓ How services are billed and paid

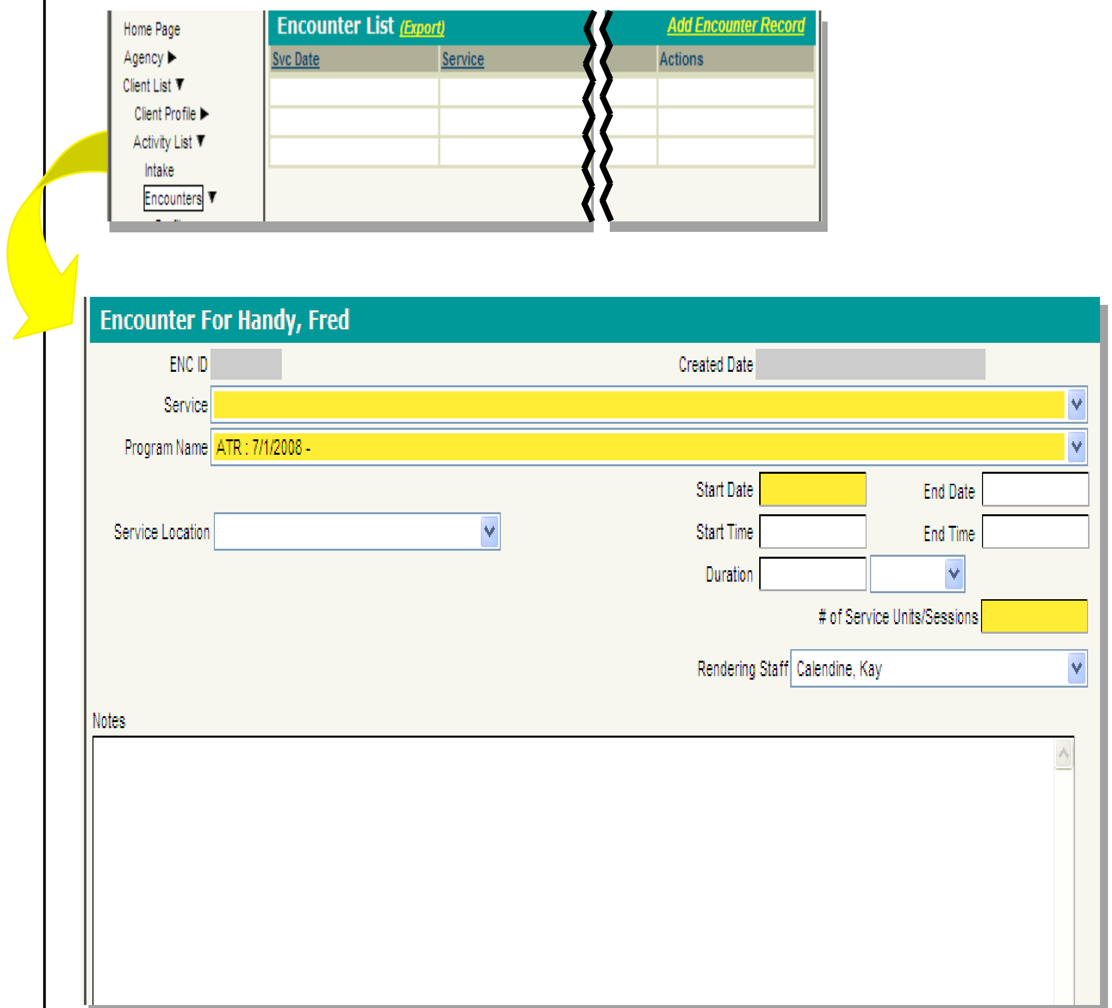
To create an ***Encounter*** for a client:

1. Using the *Left Side Navigation Pane,* select the client that this Encounter is for. (see p. 11 for detailed instructions on client searches).
2. Once the Client record is active, click on the **Activity List** and then on the **Encounters** link. This opens an Encounter List screen.
3. Click on the Add Encounter Record link to create a new ***Encounter***



In the *Encounter for [Client]* screen, complete the required fields.

1. <u>Service</u>: Only the services issued on the voucher will appear in the Service drop-down box.
2. <u>Program Name</u>: This will always default to ATR
3. <u>Service Location</u>: This is not a required field; however, If your agency has more than one location select appropriate location
4. <u>Start Date</u>: The day the service is rendered.
   - ✓ This refers to the date the service was provided, not the date the voucher was issued. Please be sure each Encounter record that is created *for the same service* has a unique Start Date
5. <u>Service Units/session</u>: This must be fewer than or equal to the number of units indicated on the voucher.
6. <u>Rendering Staff</u>: The system will automatically enter the name of the VMS-trained personnel.
7. <u>Notes</u>: These are clinical notes for your purposes only. They are confidential and cannot be viewed by outside Agencies.

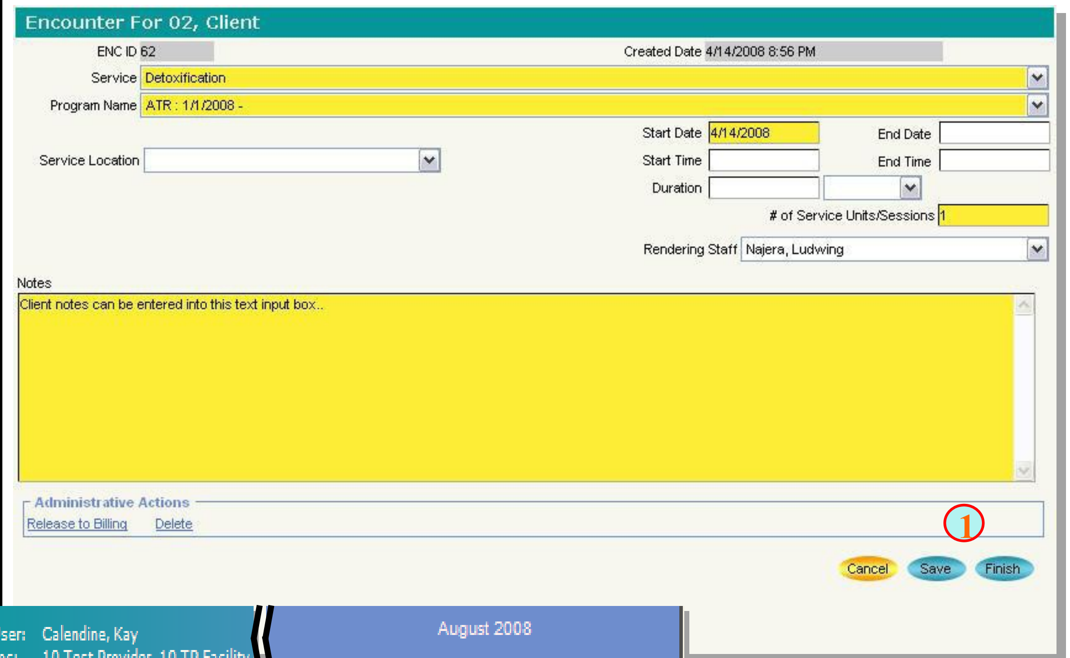


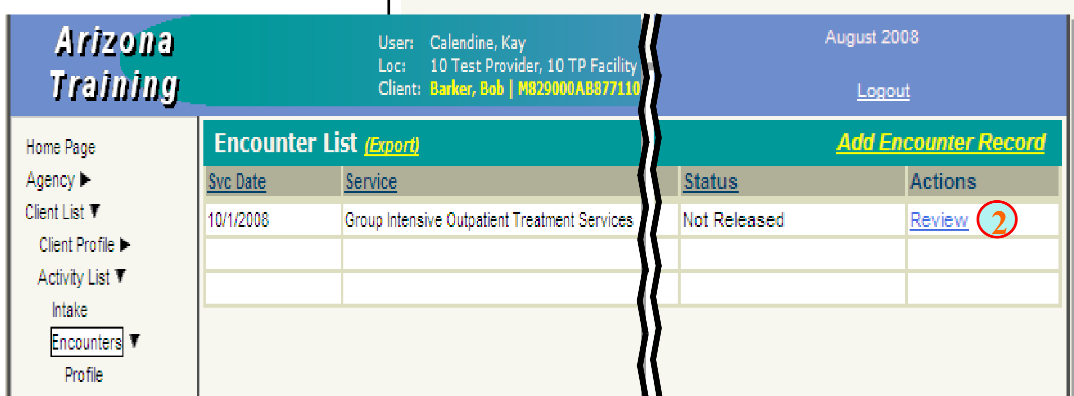
1. Once you complete the required fields click on the Finish button. You will be returned to the *Encounter List* screen.

   ✓ This ***Encounter*** will now appear in the *Encounter List* with a status of "Not Released".

   ✓ You may continue to edit and add information to this ***Encounter*** until you choose to Release the Encounter to billing.

2. To edit an ***Encounter***, click on the **Review** link in the Actions column



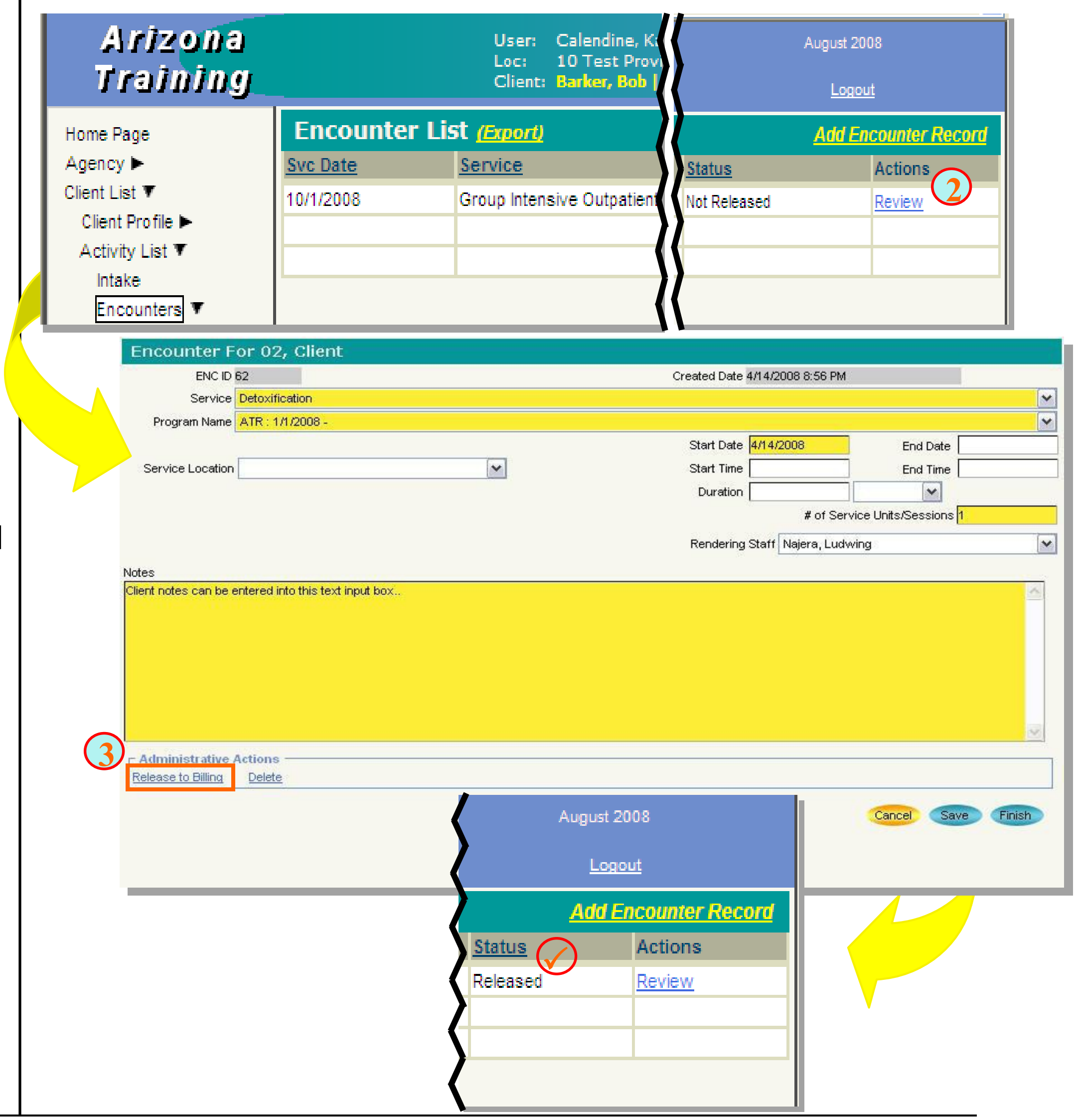


It is recommended that ***Encounters*** be released to billing as soon as possible, preferably on a weekly basis or as soon as services are provided.

To see the details of a completed ***Encounter*** and release it to billing:

1. Return to the *Encounter List* screen following the steps outlined for "Completing an Encounter Record"
2. Choose the appropriate Encounter record from the list and click on the **Review** link located in the Actions column.
   - ✓ Note that now the "Administrative Actions" box, two active links appear: **Release to Billing** and **Delete.**
3. Click on the **Release to Billing** Actions link if the Encounter is ready for billing.
   - ✓ When an ***Encounter*** is released to billing, it becomes 'read-only' and cannot be edited.

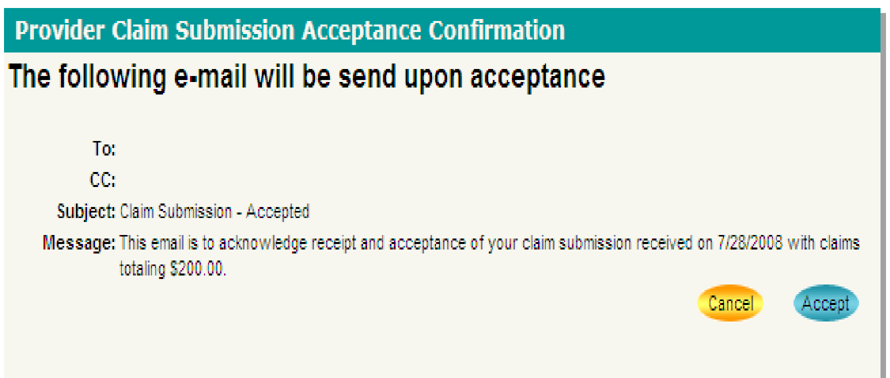
     If you release an Encounter before it was ready for billing, contact your Drug Court Case Managers.
   - ✓ You will see that the ***Encounter*** Status has changed in the *Encounter List* screen and now reads "Released."



After you release an ***Encounter*** to billing, the encounter becomes a ***Claim*** for Payment.

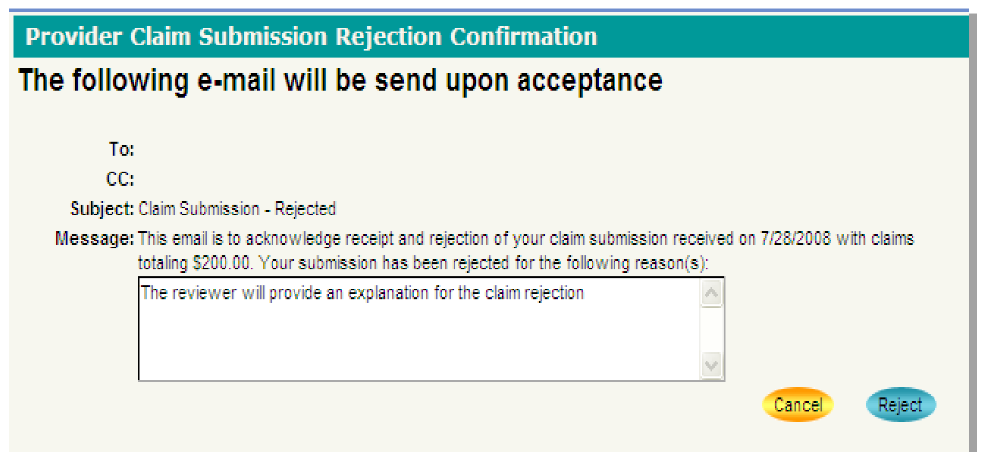
Once a week, the VMS puts all of the claims your agency has submitted into a Claim Batch.

These Claim Batches are reviewed for accuracy and then forwarded for payment. The system will generate an automatic email to let you know the claim has been accepted.



Occasionally, a discrepancy may be found in one of the Claims. When this occurs, the entire claim batch will be returned to you for correction. (See pages 21-25 for instructions on correcting a Claim.)

Although this process takes place entirely within the VMS, you will also receive an email explaining why the Claim Batch was returned and what corrections are needed.



The VMS allows you to track your claims as they advance through the system.

To view the status of a claim:

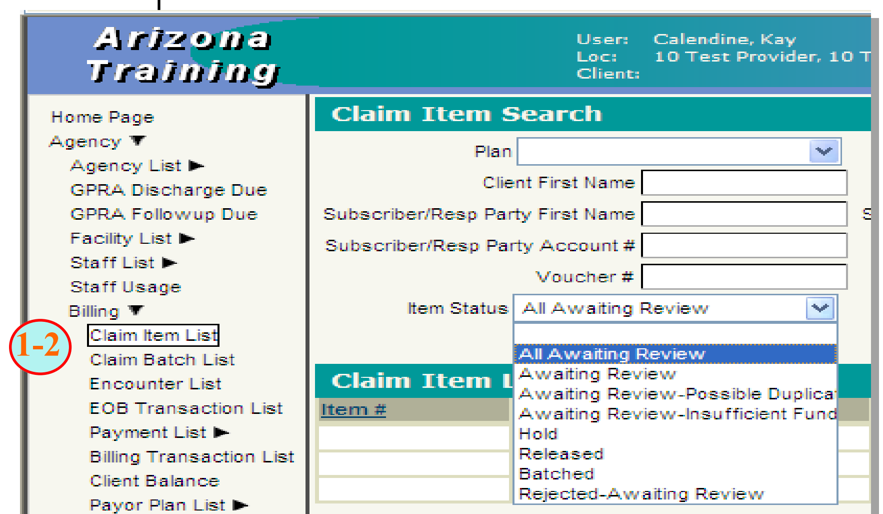
1. Using the Left Side Navigation Pane, click on the Agency and Billing links.
2. The first item under Billing is Claim Item List. Click on this to open the Claim Item Search page.

   ✓ You can search Claim Items by entering the criteria into the search fields or leave all fields blank to generate a list of all Claim Items.

   ✓ By default, the *Claim Item List* will display all ***Claims*** with the "Awaiting Review" status.

Item Status Definitions:

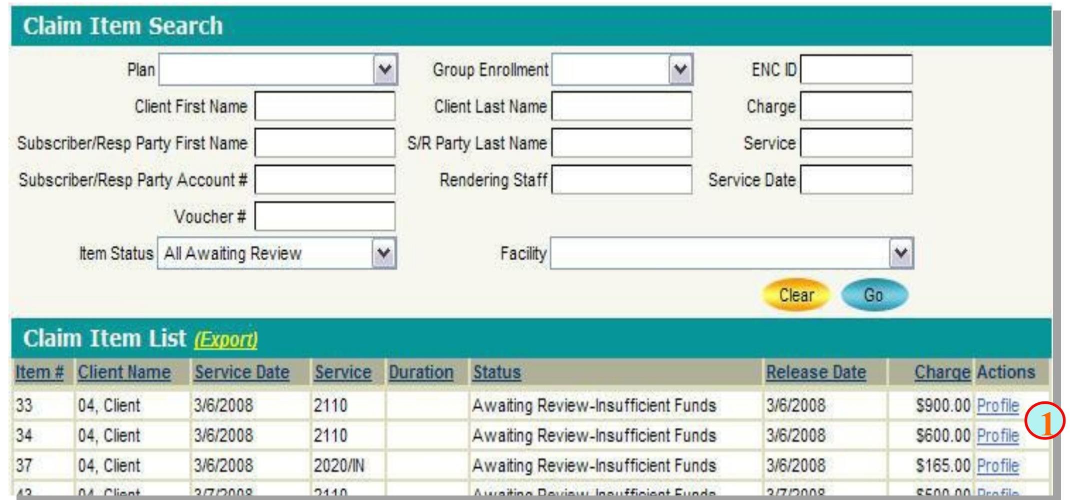
- Awaiting Review: These claims have not completed the system-automated review process.
- Hold: The Hold status indicates that the review process has been temporarily suspended for this claim.
- Released: This claim has completed the system review and is ready to be batched.
- Batched: Claims with a Batched status have been processed through VMS and are ready to be submitted for payment.
- Rejected-Awaiting Review: This status indicates the system-automated review detected a claim error, and the claim was manually reviewed and returned to the Agency for correction.

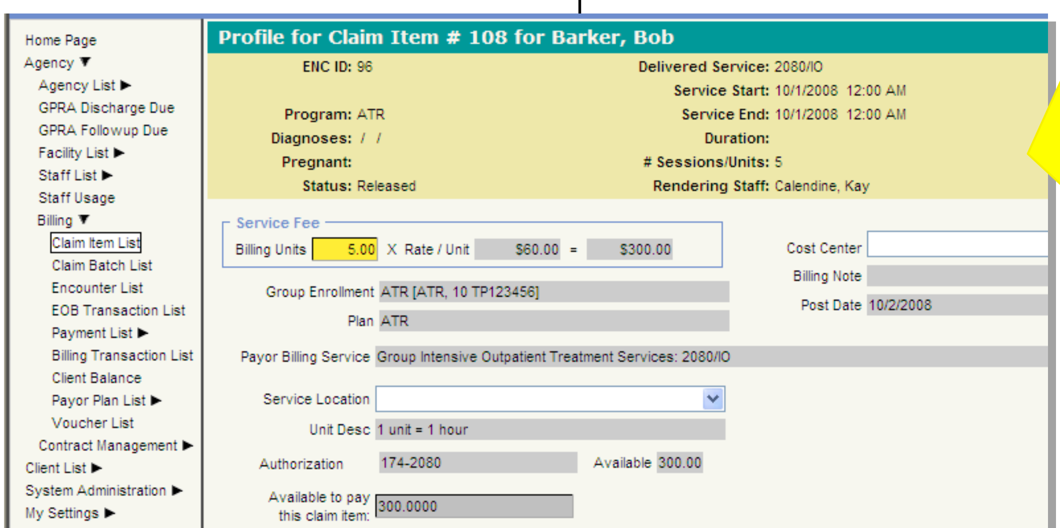


The Claim Item List displays the results of your Claim Item search.

1. Click on the Profile link in the Actions column to see more detailed information on the Claim Item.

   ✓ The detailed profile includes information on the type of service provided, the service dates, billing units and payment amounts.





A Claim Batch may be rejected for several reasons, including for example, if units were inadvertently double billed, or an encounter was released prematurely.

VMS will generate an email notifying you that the claim batch was rejected, and you will need to go into VMS to resolve the rejected claim batch.

Resolving the Claim Item error requires 4 steps:

1. Remove the claim item needing fixing;
2. Resubmit the claim batch minus the claim item;
3. Correct the claim item;
4. Resubmit the corrected claim item;

A minority of claims will have slightly different procedures for resolving a claim. Page 25 reviews the exceptions and details the additional steps needed to resolve the claim.

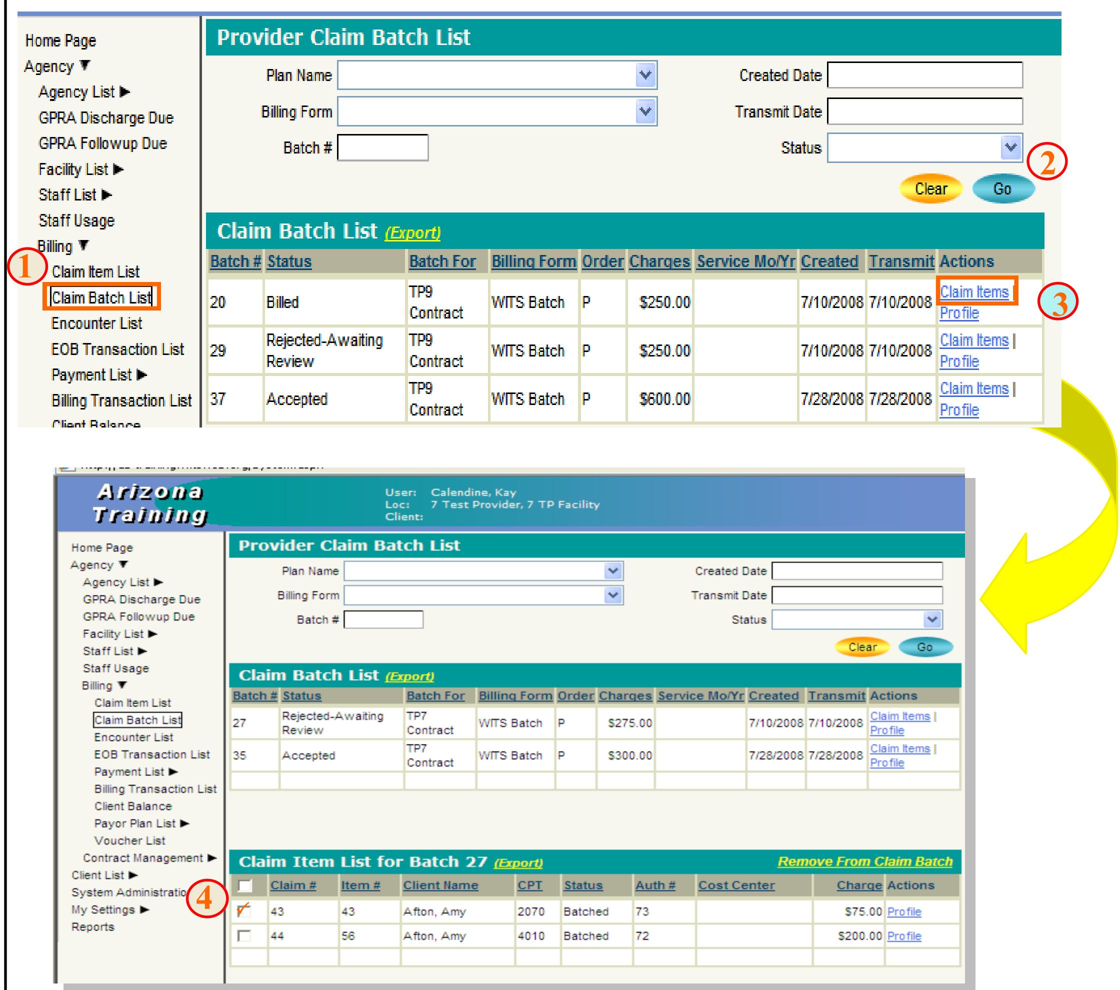
<u>Removing a Claim Item</u>:

1. Starting at the Left Navigation Menu, first click on agency, then billing, then claim batch list.
2. On the Provider Claim Batch List page, search for batches with a "Rejected-Awaiting Review" status. This status indicates the Claim Batch in question.
3. In the Actions column for that batch, click on [Claim Items]

The Claim Items for that batch will appear in the Claim Items table

4. Click in the check box on the far left side of the Claim Item List table to select the claim item needing to be modified or deleted from the batch
5. Then click on [Remove from Claim Batch] in the upper right hand corner of the Claim Item list table.

This action will remove the specified claim item.



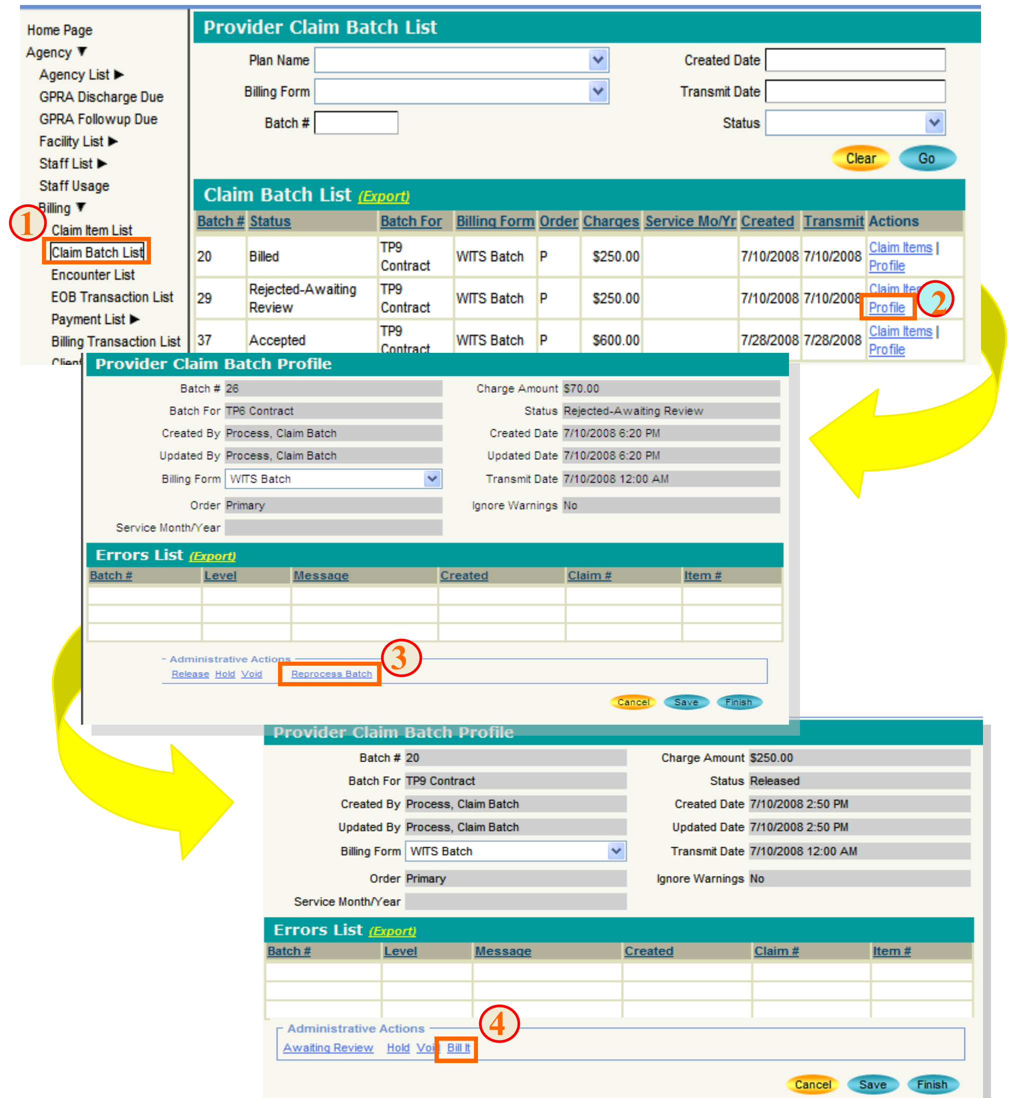
Reprocessing the Original Claim Batch:

Once the claim item that needs correcting is removed from the claim batch, the original batch will need to be resubmitted.

To Resubmit a Claim:

1. Return to the Provider Claim Batch List screen
2. Click on the Profile link associated with the claim to be reprocessed. It will still show a “Rejected-Awaiting Review” status.
3. Click on the Reprocess Batch link in the Administrative Actions box.

   This will change the status to Released, and the options available in the Administrative Actions box will change to Awaiting Review, Hold, Void, and Bill It
4. Click on the Bill It link to send the batch to the payer for approval. The status of the batch should be “Billed” in order to be processed for payment.



Correcting a Claim Item:

With the Claim Item removed and the original Claim Batch resubmitted, you are now ready to correct the Claim Item and resubmit it to billing.

To correct a claim item:

1. Click on the Claim Item List link in the Left Navigation Menu.
2. Select the appropriate Claim Item to review, and click on the Profile link in the Actions column.

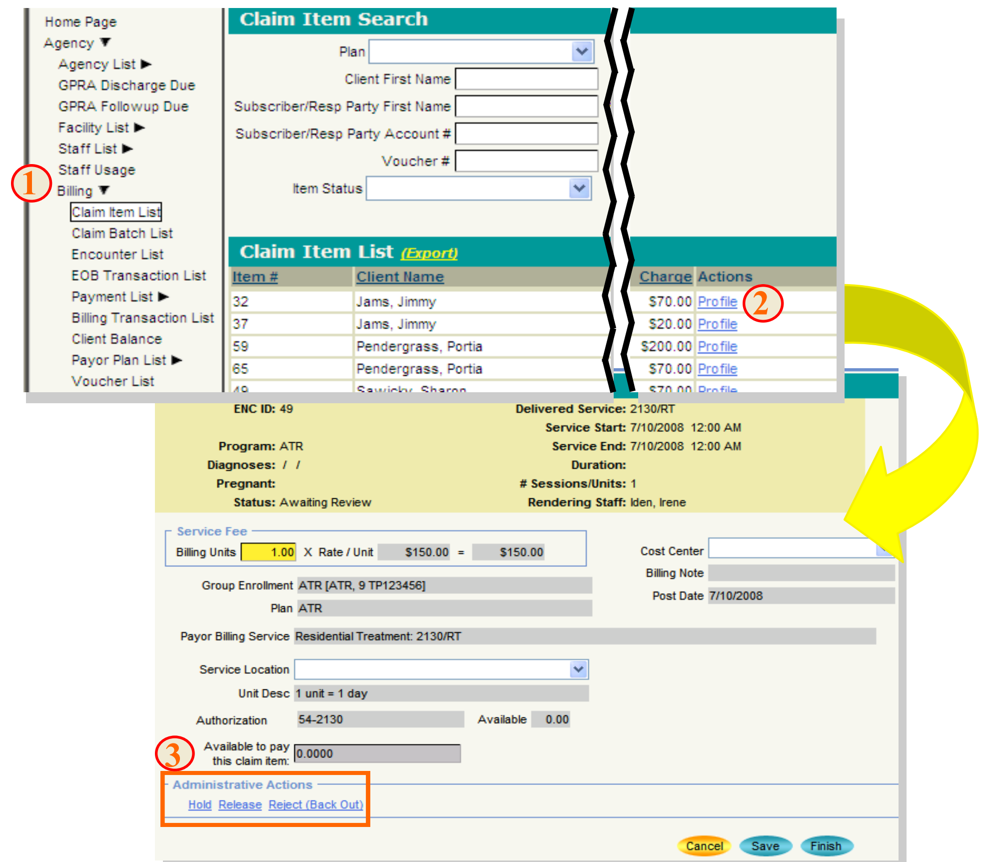
✓ The Administrative Actions box shows three options:

3a. You may modify the units and then save and click Release to re-release the claim for billing;

3b. Hold the claim, which will allow you to hold off on making any changes, although some action will be required at some point for payment; or,

3c. Reject (Back out) of the claim. If you choose to reject or back out of the claim, it is removed from the system, and a new encounter will need to be created.

4. Once you re-release the claim for billing, it will be included in the next batching of claims.



✓ Note: Encounters corresponding to claims that have been backed-out will appear in red in the encounter list. The encounter can then be either modified as needed and released to billing or deleted from the encounter profile screen.

<u>Situational Variations for Claim Batch Resolutions</u>: Under certain circumstances, you will have a claim batch that requires additional steps to resolve it. The two circumstances you are most likely to encounter are described below, along with the additional steps you will need to take to reconcile the Claim Batch.

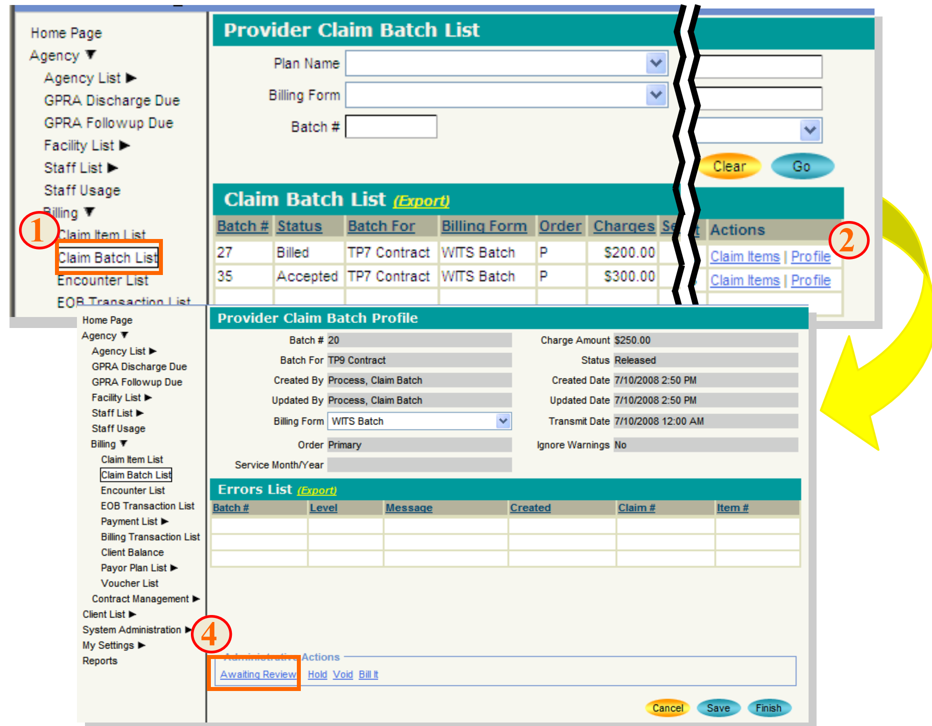
If a Claim Batch is resubmitted prior to making modifications:

✓If a rejected claim batch is reprocessed before modifications were made, you will need change the claim's status in the system before you will be able to modify the claim.

To change the status:

1. Click on the Claim Batch list on the left hand side Navigation Pane
2. Search for the appropriate claim batch
3. Click on the Profile link for that claim batch
4. Click on "Awaiting Review" in the Administrative Action box on the lower left side of the screen.

Once the status has been changed, continue with step 2 on page 22.



If a rejected Claim Item is associated with a closed voucher:

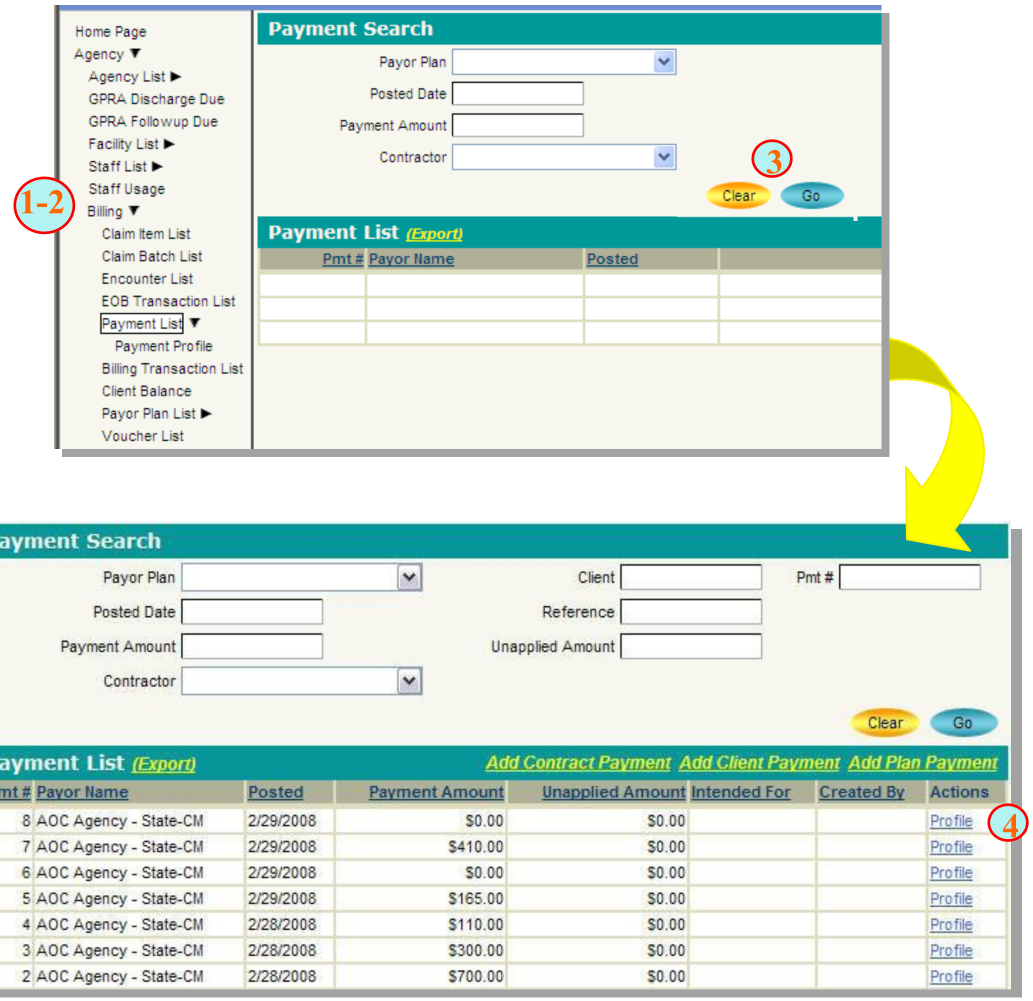
Claim Items associated with a closed voucher cannot be manipulated.

✓ Contact your Drug Court Case Manager to have the voucher temporarily re-opened to allow modifications to a claim item.

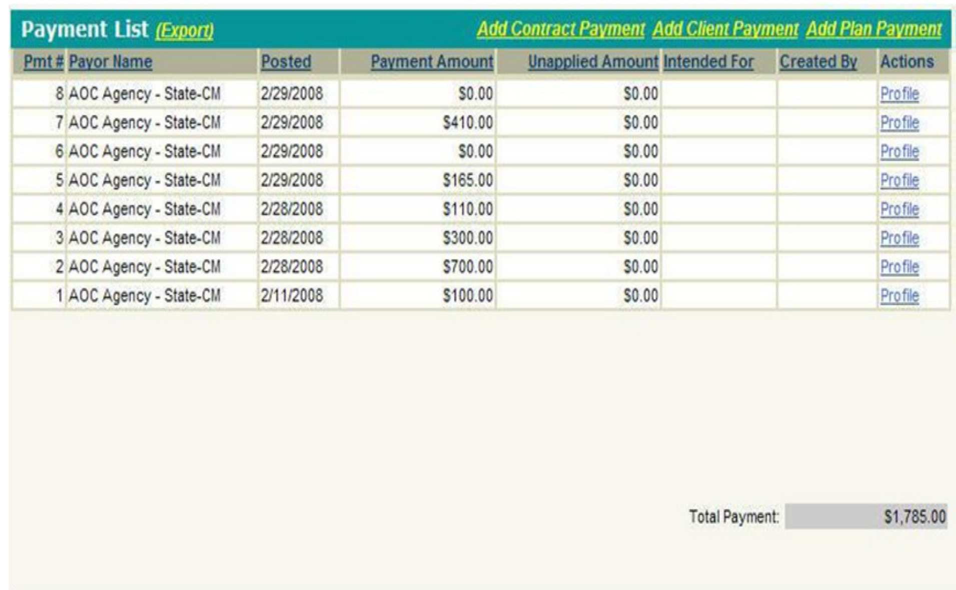
As with the Claim Batches, you are able to view your claim payment status once they have been submitted for payment.

To review Payment Status:

1. Using the Left Side Navigation Pane, click on the Agency and Billing links.
2. Click on the Payment List link to open the Payment Search screen.
3. Enter any search criteria you want to include and click the Go button to run the search.
   - ✓ The search will generate a payment list showing all payment submissions.
4. Click on the Profile link in the Actions column to view more details.



The *Payment List* screen shows the status of a specific Claim for Payment. Here you can see all ***Claims*** released to billing and that are ready for payment.



Payment List (Export) Add Contract Payment Add Client Payment Add Plan Payment

Pmt #	Payor Name	Posted	Payment Amount	Unapplied Amount	Intended For	Created By	Actions
8	AOC Agency - State-CM	2/29/2008	$0.00	$0.00			Profile
7	AOC Agency - State-CM	2/29/2008	$410.00	$0.00			Profile
6	AOC Agency - State-CM	2/29/2008	$0.00	$0.00			Profile
5	AOC Agency - State-CM	2/29/2008	$165.00	$0.00			Profile
4	AOC Agency - State-CM	2/28/2008	$110.00	$0.00			Profile
3	AOC Agency - State-CM	2/28/2008	$300.00	$0.00			Profile
2	AOC Agency - State-CM	2/28/2008	$700.00	$0.00			Profile
1	AOC Agency - State-CM	2/11/2008	$100.00	$0.00			Profile

Total Payment: $1,785.00

Payment List Definitions

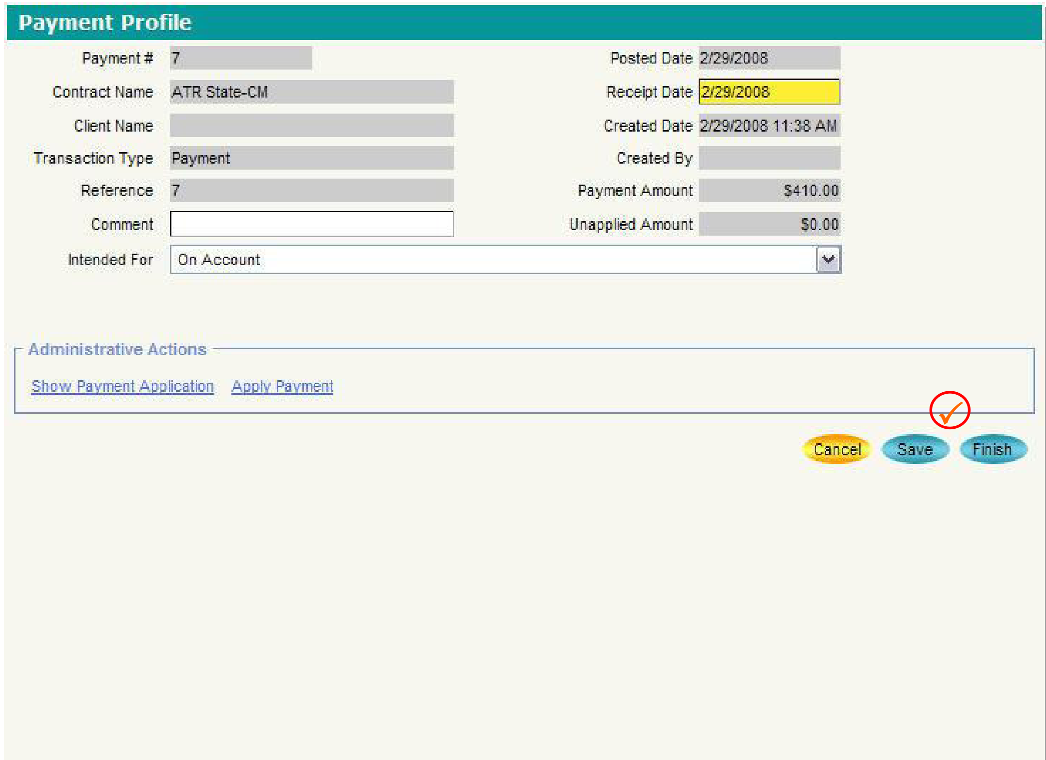
- Payment # : The payment ID assigned by the paying agency.
- Payer Name: The name of the agency making payment.
- Posted: The day the claim item was submitted for payment
- Payment Amount: The dollar amount that is being billed and requires payment
- Unapplied Amount: The amount remaining that has not been paid.

Once you have clicked on the **Profile** active link, the *Payment Profile* screen appears. Here you can enter any necessary information including:

- **Comment–** Enter any comments you have that are not directly related to accounting or billing of this claim. accounting or billing regarding the claim.
- **Receipt date**– By default this will be the day the payment is to be posted; however, this is an editable field
- **Intend for**– This drop down menu has the options of On Account or Existing Contract.

✓ Click on the Finish button to save any changes and complete review of the payment profile.

You will be taken back to the *Payment List* screen.



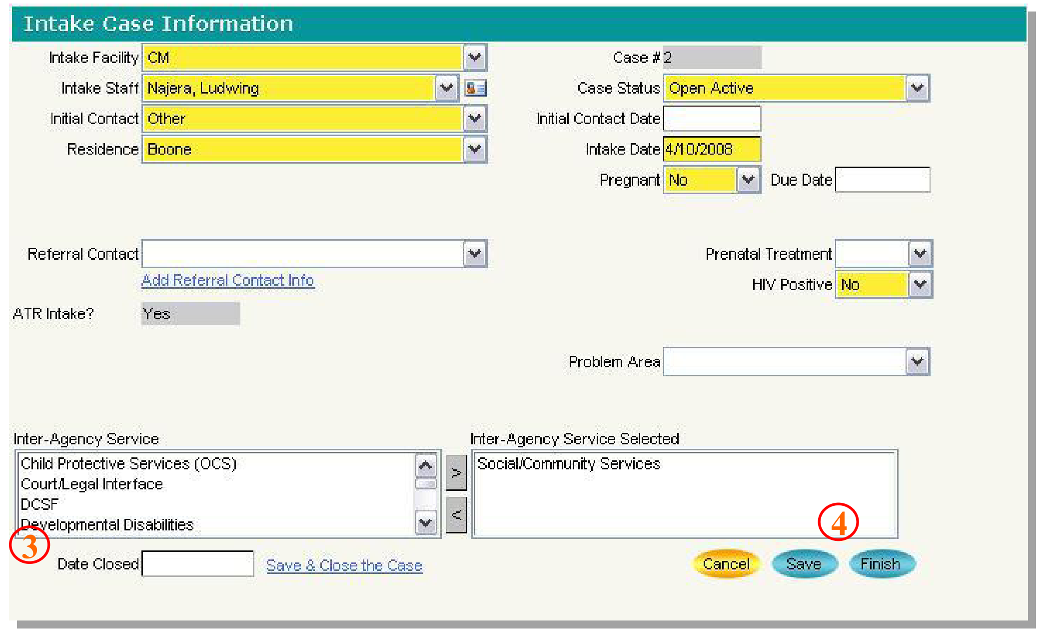
Once the client's vouchers have been expended, if you do not anticipate providing any additional services to this client, you will need to "Close the Case" for that client. Once a client is closed, you no longer have the ability to see information related to that client.

<u>To close a client case</u>:

1. Make sure the record for the client whose case you are closing is active.

    ✓ You can verify you are in the right client record by looking to see whether the client's name appears in the *Top Navigation Bar*.

2. From the *Left Side Navigation Pane,* click on the **Activity List** link and then on the **Intake** link.



This will open the *Intake Case Information* screen.

3. Enter the desired date in the "Date Closed" field located in the lower left-hand corner of the page and click on the **Save & Close the Case** link

4. Click on the <u>Save</u> and <u>Finish</u> button to complete this step.